

Work Order ID 94019

94019

Page 1

November 29, 2012 3:17:44 PM

Item ID: D2855

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Cap

Start Date: 11/30/12 Start Qty: 26.00

26

Cust Item ID:

Required Date: 12/12/12 Req'd Qty: 26.00

26

Customer:

Reference:

Approvals:

Process Plan: CZ

Date: 12/11/12

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start *NR1*

Stop *NR2*

Seq#	Operation	Set Up	Te	ID	Tool #	Plan	Accept	Reject	Reject	Ins.
Work Center ID	Description	Run Hours				Code	Qty	Qty	Number	Stamp
Draw Nbr	Revision Nbr									
D2855	Rev B									

100

0.00

100

PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: 18551 Cast per Dwg D2855 Material Release Note Required

CZ 12/11/30 (26)

110

0.00

110

Receive & Inspect for Damage & Mat'l Certs

Packaging

Memo

0.00

Packaging

Ensure Material Release Note is attached

13/01/3 (26)

120

0.00

120

QC6- Inspect dimensions to drawing

QC

Memo

0.00

Quality Control

13-1-4

26

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

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Revision ID:

Stop *NS2*

Item Name: Cap

Start Date: 11/30/12 Start Qty: 26.00

26

Cust Item ID:

Required Date: 12/12/12 Req'd Qty: 26.00

26

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operator Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Small Fab	0.00				26	0		Jm 12-1-10
130	Small Fab	0.00							
Small Fab	Memo								
	1- Drill as per Dwg D2855 using DT82352- Open holes to 19/64"3- Deburr								
140	QC5- Inspect part completeness to step on W/O	0.00							
140		0.00				26			
QC	Memo					Count			
Quality Control									
150	White Gloss (Ref 4.3-21465 4.3-Alum)	0.00							
150		0.00				26			PL 12-1-15.
Powdercoat	Memo								
Powder Coating	START TIME: 12:35								
	FINISH TIME: 1:05								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

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Item Name: Cap

Start Date: 11/30/12 Start Qty: 26.00

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Cust Item ID:

Required Date: 12/12/12 Req'd Qty: 26.00

26

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160	QC3- Inspect Part Finish	0.00							
160									
QC	Memo	0.00							
Quality Control									
170		0.00							
170	Small Fab								
Small Fab	Memo	0.00							
Small Fab	Install Inserts as per Dwg D2855								
180		0.00							
180	QC5- Inspect part completeness to step on W/O								
QC	Memo	0.00							
Quality Control									

26x 1 11 13/03/05

26 1 11 13/07/05

26 1 13-8-5



NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 94019

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November 29, 2012 3:17:44 PM

Item ID: D2855 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Cap
 Start Date: 11/30/12 Start Qty: 26.00 *26* Cust Item ID:
 Required Date: 12/12/12 Req'd Qty: 26.00 *26* Customer:
 Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start *NR1*
 QC: Date: SPC (Y/N): Date: Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190	Identify as per dwg & Stock Location: <u>FP-001</u>	0.00							
190									
Packaging	Memo	0.00							
Packaging									
200	QC21- Final Inspection - Work Order Release	0.00							
200									
QC	Memo	0.00							
Quality Control									

Handwritten notes: 13/03/10, 13-03-06, 13-03-04

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <hr/> <hr/> <hr/>		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other <hr/> <hr/> <hr/>	

Picklist Print

November 29, 2012 3:17:44 PM

Page 1

Work Order ID: 94019

Parent Item: D2855

Parent Item Name: Cap

Start Date: 11/30/12

Required Date: 12/12/12

Start Qty: 26.00

Required Qty: 26.00

Comments: IPP: B00.06.22 Added receiving step & removed P/O for powder coat EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
ALS7-1032-225 INSERT		Purchased	No			100	Each	3,762.0000	2	52		13/03/06	

Location	Loc Qty	Loc Code
FG	100	
118520	100	
FP001	2550	
118520	584	
122290	1966	
ST281	1112	
100896	135	
111529	27	
122333	950	

D2855P

Cap

Purchased

No

170

Each

0.0000

1

26

12/3/03 (26)

NCR: Yes / No

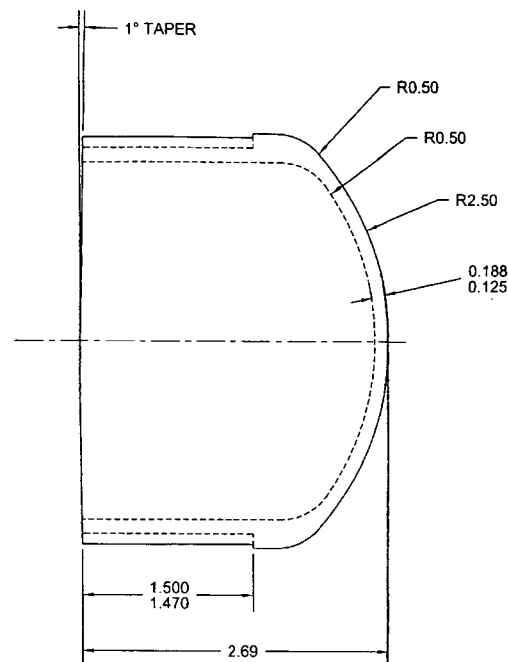
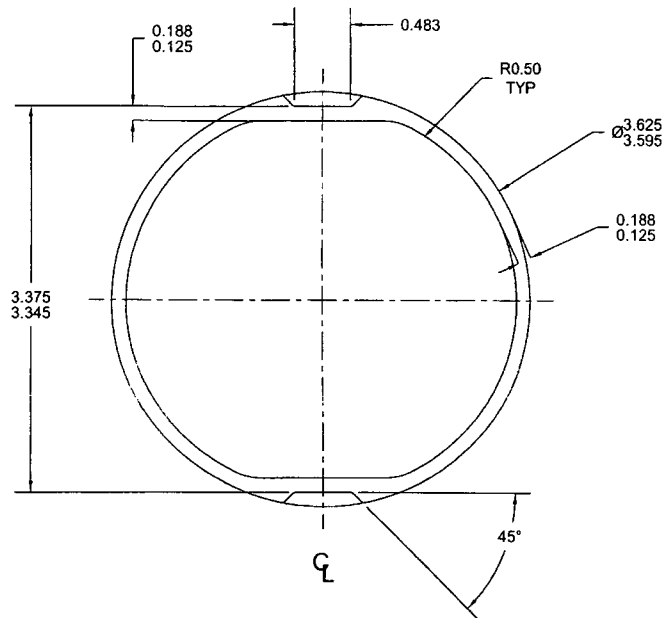
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	



D2855C CASTING DETAIL



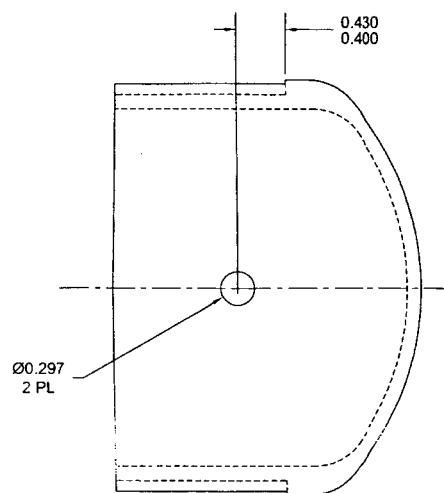
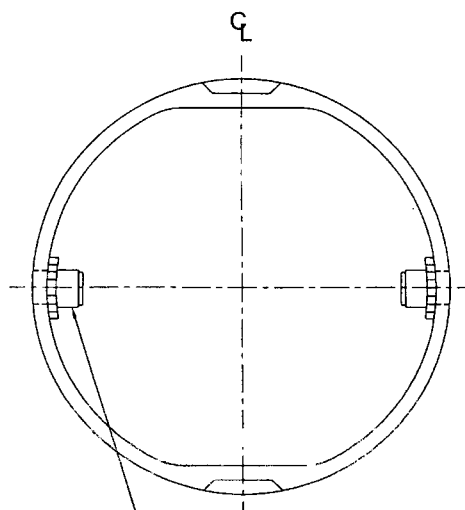
NOTES:

- 1) MATERIAL: CASTING ALUMINUM ALLOY A356.2 (F)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.62 lbs

021211129
W10' 94019

RELEASED
09/12/12

B	DRAWING UPDATED TO CURRENT STANDARDS. ADD D2855-3 & D2855C (ZN A4-1, A4-3)		RF	09.06.30
A	NEW ISSUE (WAS D2575 REV. E)		DS	96.12.12
REV.	DESCRIPTION		BY	DATE
DESIGN	DS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA		
DRAWN	RF			
CHECKED	RF			
MFG. APPR.	RF			
APPROVED	RF			
DE APPR.	RF	DRAWING NO.	D2855	REV.
DATE	09.06.30	TITLE	CAP	SHEET 1 OF 3
		CAP		SCALE
				N
COPYRIGHT © 1996 BY DART AEROSPACE LTD				
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INSTALL ALS4-1032-225 (OR AKS7-1032-225, OR
ALS7-1032-225, OR AKS4-1032-225) INSERT ON
INSIDE OF CAP (AFTER POWDER COAT)
2 PL

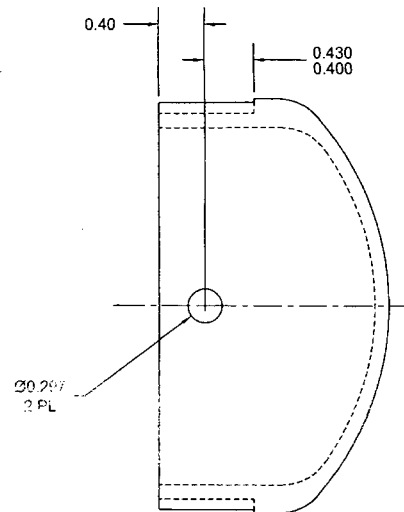
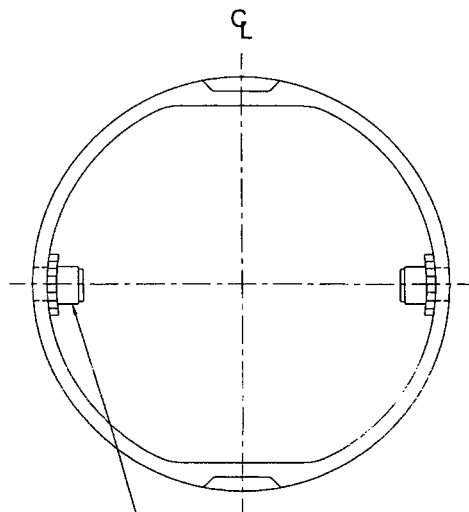
D2855 CAP
(MAKE FROM D2855C CASTING)

RELEASED
31/12/15 MP


NOTES:

- 1) MATERIAL: MAKE FROM D2855C
- 2) FINISH: POKER COAT "WHITE" (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.63 lbs

DESIGN	DS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	PA	DRAWING NO.	REV. B
MFG. APPR.	ED	D2855	SHEET 2 OF 3
APPROVED	MP	TITLE	SCALE
DE APPR.	MP	CAP	NTS
DATE	09.06.30	COPYRIGHT © 1996 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	







INSTALL ALS4-1032-225 (OR AKS7-1032-225, OR
ALS7-1032-225, OR AKS4-1032-225) INSERT ON
INSIDE OF CAP (AFTER POWDER COAT)
2 PL

D2855-3 CAP 
(MAKE FROM D2855C CASTING)

NOTES:

- 1) MATERIAL: MAKE FROM D2855C OR D2855
- 2) FINISH: POWDER COAT "WHITE" (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.50 lbs

RELEASED
29/07/15/16

DESIGN	DS	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. B
MFG. APPR.		D2855	SHEET 3 OF 3
APPROVED		TITLE	SCALE
DE APPR.		CAP	NTS
DATE	09.06.30	COPYRIGHT © 1996 BY DART AEROSPACE LTD	
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Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO18551

Purchase Order Date 11/30/12

PO Print Date 11/30/12

Page Number 1 of 1

Order From :

VC-ALU001

ALUMINUM FOUNDRY & PATTERN WORKS LTD.
2225 CHEMIN ST. FRANCOIS
DORVAL, QC H9P 1K3
CA

Contact Name

Vendor Phone

514 683 9777

Vendor Fax

514 683 0375

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

26724

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	D2855P	Cap	12/17/12 Yes	50.00 Each	FedEx Pl collect	\$18.7000	\$935.00

Special Inst: AS PER DWG D2855 REV. B
26 X B94019
24 X B93817

26724

PO Total:

\$935.00

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

Change Nbr: 1

Change Date: 11/30/12

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required - YES NO

Aluminum Foundry Ltd

2225 Chemin St. Francois
Dorval, Québec H9P 1K3
Tel: (514) 683-9777
Fax: (514) 683-0375
email: info@foundryafpw.com

Packing Slip

Packing Slip No.: 34214
Shipped Date: 19 12 2012

Sold to:	Ship to:
DART AEROSPACE 1270 ABERDEEN STREET HAWKSBURY, ONTARIO K6A 1K7 Tel. (613) 632-5200 Fax (613) 632-5246	DART AEROSPACE 1270 ABERDEEN STREET HAWKSBURY, ONTARIO K6A 1K7
Order No.: 018551	
Shipped By:	
Tracking No.:	

Item No.	Unit	Description	Quantity
Z098046	Each	D2855 CAP REV.A B#1235301 ingot# 1112047 <i>SMS</i>	50 <i>26</i>
		Received by:	
		Date:	
Comment:			

*Alu Chantal*7 CERTIFICAT DE CONFORMITÉ
CERTIFICATE OF COMPLIANCEFONDERIE D'ALUMINIUM ET MODELERIE (1988) LTEE
ALUMINUM FOUNDRY & PATTERN WORKS (1988) LTD2225 CHEMIN ST. FRANCOIS, DORVAL, QC H9P-1K3
TEL : (514) 683-9777 FAX: (514) 683-0375Expédié à
Shipped

DART AEROSPACE

A.F. & P.W. Série no./Serial no.

1270 Aberdeen Street

Packing
Date: 12/12/2012 Slip No. 34214

Hawksbury, ON, K6A 1K7

Vôtre No. Commande 18551
Your order No.

Ceci est pour certifié que le matériel liste ci-dessous est selon les spécifications du bon d'achat ci-haut, et que les documents en evidence des rapports et certificats de détaillants sont en file dans notre bureau.

This is to certify that the material listed below is according to your specifications on above P.O. and that documentary evidence of the tests or release certificates from the original supplier are on file in this office.

Quantité Quantity	Description	Notre No. Our No.	Spécifications	Note d'autorisation Incoming Release note
50	D 2855 CAP	Z098046	1356.2	B# 1235301

Analyse
Analysis (as in Ingot 1112047)

(Si)	7.0259	(Al)	balance
(Fe)	0.4010		
(Cu)	0.2048		
(Mn)	0.1819		
(Mg)	0.3999		
(Zn)	0.1369		
(Ti)	0.1170		

Donne
Yield :Résistance à la tension :
Tensile Strength :Allongement par pouce carré :
S.I. Elongation : %Pour et au nom de
For and on behalf of :FONDERIE D'ALUMINIUM ET MODELERIE (1988) LTEE
ALUMINUM FOUNDRY & PATTERN WORKS (1988) LTDDept/Dep :
Par/Per :

Coc-100